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**DECLARATION FOR UTILITY OR  
DESIGN  
PATENT APPLICATION  
(37 CFR 1.63)**



Declaration  
Submitted  
with Initial  
Filing

OR



Declaration  
Submitted after Initial  
Filing (surcharge  
(37 CFR 1.16 (e))  
required)

Attorney D ck t Number

23209

First Nam d Inv nt r

Erling Reidar ANDERSEN

**COMPLETE IF KNOWN**

Application Number

Filing Date

Art Unit

Examiner Name

As the below named inventor, I hereby declare that:

My residence, mailing address, and citizenship are as stated below next to my name.

I believe I am the original and first inventor of the subject matter which is claimed and for which a patent is sought on the invention entitled:

**Method and Apparatus for Hydrogenating Hydrocarbon Fuels**

(Title of the Invention)

the specification of which



is attached hereto

OR



was filed on (MM/DD/YYYY)

as United States Application Number or PCT International

Application Number

and was amended on (MM/DD/YYYY)

(if applicable).

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56, including for continuation-in-part applications, material information which became available between the filing date of the prior application and the national or PCT international filing date of the continuation-in-part application.

I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or (f), or 365(b) of any foreign application(s) for patent, inventor's or plant breeder's rights certificate(s), or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent, inventor's or plant breeder's rights certificate(s), or any PCT international application having a filing date before that of the application on which priority is claimed.

| Prior Foreign Application<br>Number(s) | Country | Foreign Filing Date<br>(MM/DD/YYYY) | Priority<br>Not Claimed  | Certified Copy Attached? |                          |
|--|---------|-------------------------------------|--------------------------|--------------------------|--------------------------|
|  |         |                                     |                          | YES                      | NO                       |
|  |         |                                     | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
|  |         |                                     | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
|  |         |                                     | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
|  |         |                                     | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

☐ Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto:

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**DECLARATION — Utility or Design Patent Application**Direct all correspondence to: ☒ Customer Number or Bar Code Label **26,975** OR ☐ Correspondence address belowName **Mario D. Theriault, Reg. #: 40,368**Address **812 Hwy. 101 Nasonworth**City **Fredericton**State **New Brunswick**ZIP **E3C 2B5**Country **Canada**Telephone **(506) 450-3788**Fax **(506) 450-3735**

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

NAME OF SOLE OR FIRST INVENTOR : ☐ A petition has been filed for this unsigned inventorGiven Name **Erling Reidar**  
(first and middle [if any])Family Name **Andersen**  
or SurnameInventor's  
Signature Date **NOV 26 - 03**Residence: City **Gressvikveien**State **Fredrikstad**Country **Norway**Citizenship **Norwegian**Mailing Address **Gressvikveien 32A, 1621 Fredrikstad**City **Gressvikveien**State **Fredrikstad**ZIP **1621**Country **Norway**NAME OF SECOND INVENTOR: ☐ A petition has been filed for this unsigned inventorGiven Name  
(first and middle [if any])Family Name  
or SurnameInventor's  
Signature

Date

Residence: City

State

Country

Citizenship

Mailing Address

City

State

ZIP

Country

☐ Additional inventors are being named on the \_\_\_\_\_ supplemental Additional Inventor(s) sheet(s) PTO/SB/02A attached hereto.

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# **POWER OF ATTORNEY and CORRESPONDENCE ADDRESS INDICATION FORM**

|                        |                               |
|------------------------|-------------------------------|
| Application Number     |                               |
| Filing Date            |                               |
| First Named Inventor   | Erling Reidar ANDERSEN        |
| Title                  | Method and Apparatus for, etc |
| Art Unit               |                               |
| Examin                 | am                            |
| Attorney Docket Number | 23209                         |

I hereby appoint:

☒ Practitioners associated with the Customer Number:

26,975



26975

PATENT TRADEMARK OFFICE

OR

☐ Practitioner(s) named below:

| Name | Registration Number |
|------|---------------------|
|      |                     |
|      |                     |
|      |                     |
|      |                     |
|      |                     |

as my/our attorney(s) or agent(s) to prosecute the application identified above, and to transact all business in the United States Patent and Trademark Office connected therewith.

Please recognize or change the correspondence address for the above-identified application to:

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OR

☐ The address associated with Customer Number:

OR

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| <input type="checkbox"/> Firm or Individual Name |  |       |  |     |
| Address  |  |       |  |     |
| Address  |  |       |  |     |
| City   |  | State |  | Zip |
| Country  |  |       |  |     |
| Telephone  |  | Fax   |  |     |

I am the:

☒ Applicant/Inventor.

☐ Assignee of record of the entire interest. See 37 CFR 3.71.  
Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96)

## **SIGNATURE of Applicant or Assignee of Record**

|           |                           |           |                 |
|-----------|---------------------------|-----------|-----------------|
| Name      | Erling Reidar ANDERSEN    |           |                 |
| Signature | <i>Erling R. Andersen</i> |           |                 |
| Date      | Nov. 26 03                | Telephone | 011-47-90981203 |

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.

☒ \*Total of ONE forms are submitted.

This collection of information is required by 37 CFR 1.31 and 1.33. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 3 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

If you need assistance in completing the form, call 1-800-PTO-9199 and select option 2.

## POWER OF ATTORNEY

In re: Application of Erling Andersen.

Application Number: **Enclosed Herewith**

Filed: Not known yet

Title: **Method and Apparatus for Hydrogenating Hydrocarbon Fuels**

Group Art Unit: 1764

Examiner: Jennifer A. Leung

To: Examiner Jennifer A. Leung

for: Assistant Commissioner for Patents  
Washington, D.C. 20231

Dear Examiner:

I, the undersigned, being the appointed patent agent of record, hereby appoint:

Mr. Palmer C. DeMeo, of  
Palmer Patent Consultants  
P.O. Box 1634  
Woodridge, Virginia  
22195 U.S.A.  
Tel: (703) 730-8663  
Fax: (703) 730-8663  
Registration Number 37,083,

as my Associate Patent Agent to prosecute said application, and to transact all business in the Patent and Trademark Office connected therewith.

Yours very truly,



Mario D. Theriault, P.Eng.  
Registration Number: 40,368

Date: December 3, 2003

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## CHANGE OF CORRESPONDENCE ADDRESS Application

Address to:  
Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450.

Application Number

Filing Date

First Named Inventor

Erling Andersen

Art Unit

Examiner Name

Attorney Docket Number

23209

Please change the Correspondence Address for the above-identified patent application to:

☐

Customer Number :

OR

☒
Firm or  
Individual Name

Palmer C. DeMeo Reg. # 37,083

Address

Palmer Patent Consultants

Address

P.O. Box 1634, 4517 Glendale Road

City

Woodridge

State

Virginia

Zip

22195

Country

USA

Telephone

703-730-8663

Fax

703-730-8663

This form cannot be used to change the data associated with a Customer Number. To change the data associated with an existing Customer Number use "Request for Customer Number Data Change" (PTO/SB/124).

I am the:

☐

Applicant/Inventor

☐

Assignee of record of the entire interest.

Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).

☒

Attorney or Agent of record. Registration Number 40,368

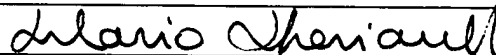
☐

Registered practitioner named in the application transmittal letter in an application without an executed oath or declaration. See 37 CFR 1.33(a)(1). Registration Number \_\_\_\_\_

Typed or Printed  
Name

Mario Theriault

Signature



Date December 3, 2003

Telephone 506-450-3788

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below".

☐

\*Total of \_\_\_\_\_ forms are submitted.

This collection of information is required by 37 CFR 1.33. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 3 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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